

PART B - ISSUE FEE TRANSMITTAL

Complete and mail this form, together with applicable fees, to: Box ISSUE FEE
Assistant Commissioner for Patents

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

BLAKELY SOKOLOFF TAYLOR & ZAFMAN
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LOS ANGELES CA 90025

LM21/0611

AUG 31 1998

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JUN 15 1998

James J. [Signature] (Depositor's name)

James J. [Signature] (Signature)

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN 8/26/98

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS		EXAMINER	DATE MAILED
08/660,016	06/06/96	019	PHAN, T		2763 06/11/98
First Named Applicant	PIPPIN,		JACK D.		

TITLE OF INVENTION METHOD AND APPARATUS FOR PROGRAMMABLE INTEGRATED CIRCUIT

09/11/1998 SNARRELL 00000137 08660016

THERMAL SENSOR FOR AN

01 FC:142 1320.00 OP
02 FC:561 30.00 OP

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3 042390.P1674C	364-488.000	F24	UTILITY	NO	\$1320.00	09/11/98

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

BLAKELY, SOKOLOFF,
1 TAYLOR & ZAFMAN

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE INTEL CORPORATION

(B) RESIDENCE: (CITY & STATE OR COUNTRY) SANTA CLARA, CALIFORNIA

Please check the appropriate assignee category indicated below (will not be printed on the patent)

Individual corporation or other private group entity government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

Issue Fee
 Advance Order - # of Copies TEN (10)

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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

EDWIN H. TAYLOR REG. NO. 25,129

(Date)

NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

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